

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM JC/OH
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 8																		
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">MS / MRS / MR</td> <td style="width: 35%;">FIRST Michael</td> <td style="width: 10%;">MI J</td> </tr> <tr> <td>NICKNAME</td> <td>LAST Callaway</td> <td>SUFFIX</td> </tr> </table>				MS / MRS / MR	FIRST Michael	MI J	NICKNAME	LAST Callaway	SUFFIX	OFFICE USE ONLY											
	MS / MRS / MR	FIRST Michael	MI J																			
NICKNAME	LAST Callaway	SUFFIX																				
Date Received																						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">ADDRESS / PO BOX;</td> <td style="width: 10%;">APT / SUITE #;</td> <td style="width: 20%;">CITY;</td> <td style="width: 10%;">STATE;</td> <td style="width: 40%;">ZIP CODE</td> </tr> <tr> <td>[REDACTED]</td> <td></td> <td>Roanoke</td> <td>TX</td> <td>76262</td> </tr> </table>				ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	[REDACTED]		Roanoke	TX	76262								
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5 CANDIDATE/ OFFICEHOLDER PHONE	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">AREA CODE</td> <td style="width: 40%;">PHONE NUMBER</td> <td style="width: 40%;">EXTENSION</td> </tr> <tr> <td>([REDACTED])</td> <td>[REDACTED]</td> <td></td> </tr> </table>				AREA CODE	PHONE NUMBER	EXTENSION	([REDACTED])	[REDACTED]		Date Hand-delivered or Date Postmarked											
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6 CAMPAIGN TREASURER NAME	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">MS / MRS / MR</td> <td style="width: 35%;">FIRST Michael</td> <td style="width: 10%;">MI J</td> </tr> <tr> <td>NICKNAME</td> <td>LAST Callaway</td> <td>SUFFIX</td> </tr> </table>				MS / MRS / MR	FIRST Michael	MI J	NICKNAME	LAST Callaway	SUFFIX	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged					
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**FORM JC/OH
COVER SHEET PG 2**

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$\$345.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$283.33	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$\$0.00	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$\$0.00	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$594.60	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$0.00	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$\$0.00	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$\$0.00	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$\$0.00	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$\$0.00	

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:
2

2 FILER NAME
Michael J Callaway

3 Filer ID (Ethics Commission Filers)

4 Date
10/30/2018

5 Full name of contributor ☐ out-of-state PAC ID#: _____
Mary Defelice

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code

Trophy Club TX 76262

8 Contributor's principal occupation
Retired

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date
11/06/2018

Full name of contributor ☐ out-of-state PAC ID#: _____
Denton Uptegrove

Amount of contribution (\$)
\$25.00

Contributor address; City; State; Zip Code

Northlake TX 76262

Contributor's principal occupation
Retired

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date
12/08/2018

Full name of contributor ☐ out-of-state PAC ID#: _____
Carol Tombar

Amount of contribution (\$)
\$120.00

Contributor address; City; State; Zip Code

Trophy Club TX 76262

Contributor's principal occupation
Retired

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 2
2 FILER NAME Michael J Callaway		3 Filer ID (Ethics Commission Filers)
4 Date 12/08/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Susan Zadeh 6 Contributor address; City; State; Zip Code [REDACTED] Trophy Club TX 76262	7 Amount of contribution (\$) \$100.00
8 Contributor's principal occupation Retired		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
1

2 FILER NAME
Michael J Callaway

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ \$0.00

5 Date
11/01/2018

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Denton County Democratic Party

8 Amount of Contribution \$
\$283.33

9 In-kind contribution description
Call Tools Phone

7 Contributor address; City; State; Zip Code
[REDACTED] Lewisville TX 76262

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Michael J Callaway	3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2018	5 Payee name Michael Callaway	
6 Amount (\$) \$315.00	7 Payee address; City; State; Zip Code 1301 Riverside Rd Roanoke TX 76262	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PrintingExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 11/01/2018	Payee name US Post Office	
Amount (\$) \$136.78	Payee address; City; State; Zip Code 516 E Byron Nelson Blvd Roanoke TX 76262	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PrintingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 11/05/2018	Payee name VAN	
Amount (\$) \$54.05	Payee address; City; State; Zip Code 1445 New York Ave Washington DC 20005	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) SolicitationFundraisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
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Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Michael J Callaway	3 Filer ID (Ethics Commission Filers)
4 Date 11/07/2018	5 Payee name Walmart	
6 Amount (\$) \$76.77	7 Payee address; City; State; Zip Code 1228 US - 377 Roanoke TX 76262	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FoodBeverageExpense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/2019	Payee name Google Domaine Names	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View CA 94043	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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